## 510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92. The assigned 510(k) number is: 600050.

1. Submitted by:	Sysmex America, Inc.
	One Nelson C. White Parkway
	Mundelein, IL 60060
	Phone: (847) 996-4675; FAX: (847) 996-4655
	Contact person: Nina Gamperling
	Date prepared: March 10, 2006
2. Name of Device:	Trade or proprietary name: Sysmex® XS, Automated
	Hematology Analyzer.
	Common name: XS
	Classification name: Automated Differential Cell Counter,
	Sysmex <sup>®</sup> XS-1000i and XS-800i (21 CFR 864.5220)
3. Predicate Device:	The Sysmex® XS, Automated Hematology Analyzer, is
	substantially equivalent to the Sysmex XE-2100 and Sysmex XT-
	Series, Automated Hematology Analyzers.
4. Device Description:	The XE-2000 and XT-Series are automated hematology analyzers previously cleared by the FDA.
5. Intended Use:	The Sysmex <sup>®</sup> XS is an automated hematology analyzer for in
	vitro diagnostic use in clinical laboratories.
6. Substantial	The following table compares the XS with the predicate method.
equivalence-similarities and differences	

# 510(k) SUMMARY OF SAFETY AND EFFECTIVENESS (continued)

**Comparison Table to Predicate Method** 

	Sysmex XE-2100	Sysmex XS-Series
	Predicate	New Instrument
Intended Use	The Sysmex <sup>™</sup> XE-2100 is a multi- parameter hematology analyzer intended to classify formed elements in anti-coagulated blood. The XE- 2100 can provide accurate and precise test results for up to 32 analysis parameters in whole blood.	The Sysmex® XS-Series is an automated hematology analyzer for <i>in vitro</i> diagnostic use in clinical laboratories.
Methodology	The XE-2100 performs hematology analyses using the following methods: RF/DC Detection Method, Sheath Flow DC Detection Method, Flow Cytometry Methods using a Semiconductor Laser and SLS-hemoglobin method.	The XS performs hematology analyses using the following methods: Sheath Flow DC Detection Method, Flow Cytometry Methods using a Semiconductor Laser and SLS-hemoglobin method.
Type of	EDTA	EDTA
Anticoagulant		
Specimen Type	Peripheral blood	Peripheral blood
Accuracy	Performance was established in the previous 510(k) submission.	Comparison to the XE-2100 and XT- Series analysers demonstrated excellent correlation.

7. Clinical Performance Data:	Studies were performed to evaluate the equivalency of
8. Conclusions:	XS to the predicate method.  The performance data demonstrated substantial
	equivalence.

#### **DEPARTMENT OF HEALTH & HUMAN SERVICES**

Public Health Service

Nina M. Gamperling, MBA, MT (ASCP), RAC Manager, Regulatory Affairs Sysmex America, Inc. One Nelson C. White Parkway Mundelein, Illinois 60060 Food and Drug Administration 2098 Gaither Road Rockville MD 20850

Re:

k060656

Trade/Device Name: Sysmex® XS, Automated Hematology Analyzer

Regulation Number: 21 CFR § 864.5220

Regulation Name: Automated differential cell counter

Regulatory Class: II Product Code: GKZ Dated: March 10, 2006 Received: March 13, 2006

### Dear Ms. Gamperling:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820). This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at (240) 276-0484. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>

Sincerely yours,

Robert L. Becker, Jr., MD, Ph.D

Director

Division of Immunology and Hematology

Office of In Vitro Diagnostic Device

**Evaluation and Safety** 

Center for Devices and

Radiological Health

Enclosure

## INDICATIONS FOR USE STATEMENT

510(k) Number (if know	мы): <u>130 (20 656</u>			
Device Name: Sysmex <sup>®</sup> XS™, Automated Hematology Analyzer				
Indications For Use:				
The Sysmex <sup>®</sup> XS is an automated hematology analyzer for <i>in vitro</i> diagnostic use in clinical laboratories.				
(PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED)				
Cone	currence of CHRD, Office of Device Evaluation (ODE)			
Prescription Use	OR Over-The-Counter Use			
	Division Sign-Off			
	Office of In Vitro Diagnostic Device			
Sysmex America, Inc. 510(k) XS Submission	Evaluation and Safety			
	(k) K060656			